South Carolina Department of Disabilities & Special Needs Day Services- Contract Compliance Review Key Indicator Review Tool for FY2022

The Key Indicators are based on DDSN Service Standards, Agency Directives, and Medicaid Policy/Requirements.

The Guidance in this document is provided as a resource to assist agencies with understanding Key Indicators. The Guidance is not intended to be, nor should be, considered as the ultimate defining resource. It should be, as inferred by its title, GUIDANCE designed to assist. State and Federal standards including policies and procedures are the ultimate resources for establishing the requirements for an Indicator.

Providers must use designated modules in Therap to document service delivery.

Timelines for implementation of individual Therap Modules may be found at: https://help.therapservices.net/app/south-carolina/

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Provider Qualifications (Includes anyone employed or contracted to provide Day Services)					
Indicator #	Indicator	Guidance			
DS-101	Day Services Staff meet the criminal background check	Source: DDSN Directive 406-04-DD.			
	requirements for the position, prior to employment.	Applies to new staff working less than 12 months.			
DS-102	Day Services Staff continue to meet the criminal	Source: DDSN Directive 406-04-DD.			
	background check requirements, upon required recheck.	Re-check required every three years.			
DS-103	Day Services Staff meet the CMS "List of Excluded	Source: DDSN Directive 406-04-DD.			
DO 404	Individuals/ Entities" check requirements for the position.	Applies to new staff working less than 12 months.			
DS-104	Day Services Staff meet the DSS Central Registry check requirements for the position.	Source: DDSN Directive 406-04-DD. Applies to new staff working less than 12 months.			
DS-105	Day Services Staff meet the TB Testing requirements for the position, prior to direct service contact.	Source: DDSN Directive 603-06-DD. Applies to new staff working less than 12 months.			
DS-106	Day Services Staff meet the annual TB screening requirements, as outlined in DDSN Directive 603-06-DD.	Source: DDSN Directive 603-06-DD. Annual TB screening must be completed by the last day of the month in which it is due.			
DS-107	New Day Services Staff have acceptable reference check requirements for the position.	Source: DDSN Directive 406-04-DD. Applies to new staff working less than 12 months.			
Provider Training Requirements (Includes any					
Indicator #	Indicator	Guidance			
DS-201	Day Services Staff must pass mandatory, competency based ANE training, as required, during pre-service orientation.	Source: DDSN Directive 534-02-DD. Applies to new employees working less than 12 months.			
DS-202	The Provider employs Day Services Staff who, when	Source: DDSN Directive 534-02-DD. Applies to employees working more than 12 months.			
	employed after 1 year, must pass mandatory, competency based ANE training within 12 month of their prior training date(s).	Training must be completed by the last day of the month in which it was due.			
DS-203	The Provider employs Day Services Staff who must	Source: DDSN Directive 567-01-DD. Does not include training covered in other Key Indicators (ANE, CPR, First Aid, Medication Technician,			
	complete new employee competency- based training	or Crisis Management).			
	requirements, as required in 567-01-DD.	Applies to new employees working less than 12 months.			
DS-204	The Provider employs Day Services Staff who must	Source: DDSN Directive 567-01-DD. Applies to new employees working less than 12 months.			
	successfully complete CPR/First Aid certifications new employee training.	Typico to non omployees morning less tituit 12 months.			
DS-205	The Provider employs Day Services Staff who, when	Source: DDSN Directive 567-01-DD.			
	employed after 1 year, continue to successfully complete	Applies to employees working more than 12 months. Training must be completed by the expiration date.			
	CPR/First Aid certifications at the frequency required by	Training must be completed by the expiration date.			
DS-206	the certifying entity. The Provider employs Day Services Staff who must	Source: DDSN Directive 567-01-DD and 567-04-DD.			
D0-200	successfully complete competency-based crisis	Applies to new employees working less than 12 months.			
	management curriculum certification prior to working alone	Davisus Dragodura, If staff received a partification but it is discovered that the association is the			
	with service participants.	Review Procedure: If staff received a certification, but it is discovered that the curriculum that was used has not been approved by DDSN, the non-compliance will be noted in the Administrative Indicators only.			
DS-207	The Provider employs Day Services Staff who, when	Source: DDSN Directive 567-01-DD and 567-04-DD.			
	employed after 1 year, continue to successfully complete	Applies to employees working more than 12 months. Training must be completed by the last day of the month in which it was due.			
	approved crisis-management certifications at the				
	frequency required by the certifying entity.	Review Procedure: If staff received a certification, but it is discovered that the curriculum that was used has not been approved by DDSN, the non-compliance will be noted in the Administrative Indicators only.			

DS-208	Day Services Staff, when employed for more than 12 months, must receive annual training on the following topics:	Source: DDSN Directive 567-01-DD. Applies to employees working more than 12 months. Training must be completed by the last day of the month in which it was due.
	 Confidentiality & HIPAA OSHA Guidelines and Workplace Safety Fire Safety/Disaster Preparedness Rights/Due Process 	Review Procedure: The provider must be able to show evidence that training occurred for each topic listed. Training may be delivered through web-based formats, in person training sessions or other methods. There is no required format or specific content required by this standard provided that the content is accurate based on standards, communications, or training produced by the Department.
DS-209	Annually, the Provider employs Day Services Staff who are made aware of the False Claims' Recovery Act, that the Federal government can impose a penalty for false claims, that abuse of the Medicaid Program can be reported, and that reporters are covered by Whistleblowers' laws.	Evidence of staff being made aware of the false claims' recovery act must be provided. This activity must be completed by the last day of the month in which it was due. Source: Contract for Capitated Model and Source: Contract for Non-Capitated Model

Day	A "DDSN Day Service" includes Employment Services - Group through a Mobile Work Crew or Enclave, Career Preparation, Community Service, Day Activity, or Support Center.			
Indicator #	# Indicator		Guidance	
DS-301	After acceptance into service but prior to the first day of attendance in a DDSN Day Service, a preliminary plan must be developed that outlines the care and supervision to be provided.		Source: Day Services Standards	
DS-302	On the first day of attendance in a DDSN Day Service, the preliminary plan must be implemented.		Source: Day Services Standards	
DS-303	Within thirty (30) calendar days of the first day of attendance in a DDSN Day Service and annually thereafter, an assessment will be completed.		Source: Day Services Standards	
DS-304	The assessment identifies the: (1) abilities / strengths. (2) interests / preferences; and (3) needs of the consumer.		Employment Services - Group is required to use the Comprehensive Vocational Service Assessment. Source: Day Services Standards	
DS-305	Based on the results of the assessment, within thirty (30) calendar days of the first day of attendance and within 365 days thereafter, a plan is developed with input from the consumer and/or his/her legal guardian (if applicable).		The Plan may be uploaded to the Individual Home Page in Therap. Employment Services – Group is required to use the Group Individual Plan of Supports for Employment (GIPSE). Source: Day Services Standards	
DS-306	The plan must include: a) A description of the interventions to be provided including time limited and measurable goals/objectives when the consumer participates in Employment Services - Group Career Preparation, Community Services, and/or Day Activity; or b) A description of the care and assistance to be provided		The Plan may be uploaded to the Individual Home Page in Therap. Employment Services – Group is required to use the Group Individual Plan of Supports for Employment (GIPSE). Source: Day Services Standards	
DS-307	when the consumer participates in Support Center. The plan must include a description of the type and frequency of supervision to be provided.		Employment Services – Group is required to use the Group Individual Plan of Supports for Employment (GIPSE). Source: Day Services Standards and DDSN Directive 510-01-DD	
DS-308	Individuals participating in Employment Services – Group must be paid at or above minimum wage.		Employment Services – Group: Documentation can be found in Record of Employment in the Group Individualized Plan of Supports for Employment (GIPSE).	
DS-309	For Support Center Services, the plan must include a description of the kinds of activities in which the consumer is interested or prefers to participate.		Goals and objectives are not required for Support Center Services. This Indicator is N/A for all other Day Services. Source: Day Services Standards	
DS-310	As soon as the plan is developed, it must be implemented.		Documentation of activities should be found in Therap in the individual's ISP. Employment Services – Group: Documentation can be found in the Therap ISP: SC Group Employment Log. Source: Day Services Standards	
DS-311	Data must be collected as specified in the plan and must be sufficient to support the implementation of the plan for each unit of service reported.		ISP data required in Therap as of September 1, 2016. Documentation of activities should be found in Therap in the individual's ISP. Employment Services – Group: Documentation can be found in the Therap ISP: SC Group Employment Log. Source: Day Services Standards	
DS-312	At least monthly, the plan is monitored by the Program Director or his/her designee to determine its effectiveness.		ISP data required in Therap as of September 1, 2016. Documentation of monitoring should be found in Therap in the individual's ISP. Source: Day Services Standards Employment Services – Group: Documentation can be found: • by making a non-billable comment in their ISP • or making a comment on a monthly clinician report and saving the report in Therap.	
DS-313	The plan is amended with input his/her legal guardian (if applica changes to the plan are necess	ble) when significant	Documentation of changes should be found either by: attaching the amendment to the Individual Home Page or by making a non-billable comment entry in their ISP.	

Employment Services – Group: Amendments can be found in the ISP SC Group Employment Log by using the scoring method Amend and making a non-billable comment.

NOTE: Amendments to paper plans must be made using a separate form identified as a plan amendment, indicating the date of the amendment, the name and date of birth, the individual's participation, the reason for the amendment, and description of how the plan is being amended. Source: Day Services Standards DS-314 Source: DDSN Directives: 100-09-DD, 100-29-DD, 505-02-DD, 534-02-DD, 600-05-DD All categories of incidents/events are recognized and reported in order to protect and promote the health, safety, A strong incident management system begins with recognition and response to events. Providers must and welfare of people. continuously monitor for possible incidents. For example, abuse, neglect, and exploitation may be a single event or a pattern of events over time. A single person may be a victim of Abuse, Neglect, Exploitation (ANE) but systematic failures within the provider that create conditions conducive to harm may also be considered ANE. In addition, an agency that fails to implement residential support plans, maintains inconsistent records about needs, and does not properly train its staff creates conditions where ANE could easily occur. DDSN expects providers to be diligently recognizing and reporting actual and alleged incidents. Incidents/events required to be recognized and reported: Abuse, Neglect, Exploitation Critical Incidents and Adverse Operations Events Medication Errors Death Restraints Review Procedure: Individual records/documentation (T-logs, GER's, medical records, behavior documentation etc.) will be reviewed to ensure that any instance that may be an incident/event was recognized and reported properly by the provider. The documentation review will include restraint reports to ensure that each instance of a restraint followed DDSN standards. Restraints that were implemented improperly or are found to be unauthorized may need to be reported as abuse. In addition, for providers that have staff that administer medications, a sample of medication administration records (MARs) will be reviewed to ensure that medication errors are reported per requirements. The minimum number of MARs that will be reviewed as part of this indicator is 3 random months for the last 12 months. If significant issues are discovered, the review may expand. A non-compliance will be cited when the reviewer finds an incident/event that should have been recognized and reported to DDSN.